

THE UNITED STATES BANKRUPTCY COURT
SOUTHERN DISTRICT OF NEW YORK

.....X
In re
KANWALDEEP SINGH KALSI

Case No. 20-10330-MG

Chapter 7

Debtor(s)

.....X

NOTICE OF TELEPHONIC SECTION 341 MEETING OF CREDITORS INSTRUCTIONS

YOU ARE HEREBY NOTIFIED that the initial section 341 meeting of creditors for the above-captioned case, scheduled as a telephonic meeting and conducted **by telephone conference on February 26, 2021 at 12:00 PM** (the “Designated Meeting Time”).

All parties shall appear by phone at the section 341 in accordance with the instructions below.

Call-in Information:

On the date and time set forth above, parties shall dial-in to the meeting using the following dialing instructions:

Meeting Dial-in No: **877-928-9071**, and

when prompted enter the Participant Code: **6407201** followed by #.

To avoid confusion or technical difficulties, attendees are instructed to call in at the Designated Meeting Time, not before that time, and to disconnect the call after their meeting is concluded. Thank you for your anticipated cooperation in this regard.

Instructions for Testifying Debtors and Counsel

No later than one day prior to the Designated Meeting time, the debtor and/or their counsel are required to email the trustee with an imaged copy of the debtor’s photo identification **and** proof of the debtor’s social security number (“Identification Documents”) A copy of the Debtor’s identification and proof of social security number must be provided to the trustee via a secure method, i.e., portal, encrypted email, etc. Identification Documents shall be those documents deemed acceptable in accordance with current applicable procedures.

Telephonic appearances shall be conducted in accordance with current applicable procedures for telephonic meetings. Accordingly, a Declaration Regarding Administration of Oath and Confirmation of Identity and Social Security Number form shall be completed by the individual performing this function and transmitted to the trustee immediately following the meeting.

Alternatively, if compliance with the procedures set forth above are not possible or practical under these emergent circumstances, the debtor’s attorney may submit prior to the time of the scheduled meeting a declaration confirming that: (1) the attorney met with the debtor in-person; and (2) the attorney examined and verified the debtor’s original identification documents and social security number. In such situations, upon notification by the debtor and/or their counsel that they are using the alternate procedures, the trustee will administer the oath telephonically at the commencement of the 341 meeting.

Date: February 09, 2021

Chapter 7 Trustee

/s/ Angela Tese-Milner
Angela Tese-Milner, Esq.
P.O. Box 35
Mattituck, NY 11952
(212) 475-3755

**DECLARATION REGARDING ADMINISTRATION OF OATH AND
CONFIRMATION OF IDENTITY AND SOCIAL SECURITY NUMBER**

In re: (Case Name) KANWALDEEP SINGH KALSI

Bankruptcy Case No. 20-10330-MG

Date of telephonic appearance at § 341(a) meeting of creditors: February 26, 2021

I declare as follows:

- 1) My name is : _____
(Print or type)
- 2) My work address is: _____
- 3) My work telephone number is: (____) _____
- 4) The address from where I participated in the § 341(a) meeting of creditors is:

- 5) I am a person authorized to administer oaths in the State of _____, by virtue of the following fact:
____ I am a notary
____ I am a court reporter
____ I am a judicial officer
____ I am authorized to give an oath under the Code of Military Justice
____ Other _____
(Give title and **legal authority** for power to administer oath)
- 6) I personally verified the identity of the debtor(s) by checking his/her/their original photo identification(s):
____ Driver's License (State & number last four digits) _____
____ State Identification (State & number last four digits) _____
____ Passport (Country, number, expiration date last four digits) _____
____ Military Identification (Branch & ID number last four digits) _____
____ Other (describe) _____
- 7) I personally inspected the following original document as proof of the social security number of the debtor(s) and orally confirmed it with the trustee:
____ Social Security Card
____ Social Security Administration Statement
____ W-2 Form
____ Recent Payroll Stub
____ Employer's Health Card or Medical Insurance Card
____ Other (specify) _____
- 8) On _____, I did administer an oath to the debtor(s), prior to the trustee commencing
(Date)
the questioning of the debtor(s) for the telephonic meeting of creditors of the debtor(s).

In accordance with 28 U.S.C. § 1746, I declare under penalty of perjury that the foregoing is true and correct.

Dated: _____ Signature: _____

**ATTORNEY DECLARATION REGARDING CONFIRMATION OF
DEBTOR IDENTITY AND SOCIAL SECURITY NUMBER**

In re: KANWALDEEP SINGH KALSI

Bankruptcy Case No. 20-10330-MG

Date of telephonic appearance at § 341(a) meeting of creditors: February 26, 2021

I swear as follows:

1) My name is: _____
(Print or type)

2) My address is: _____

3) The photo identification I have been provided to prove the above debtor's identity is as follows:

(Please complete blanks AND attach copies)

____ Drivers License (*State & number last 4 digits*) _____
____ State Identification (*State & number last 4 digits*) _____
____ Passport (*County, number last 4 digits, Expiration Date*) _____
____ Military Identification (*Branch & ID number last 4 digits*) _____
____ Legal residence alien card (*number last 4 digits*) _____
____ Other (*Describe, attach copy*) _____

4) The last four digits of the debtor's social security number are: _____

5) The proof of social security number I reviewed is as follows:

(Please attach a copy if available)

____ Social Security Card
____ W2 Form
____ Recent payroll earnings statement
____ Employers health card
____ Other (document which shows name and social security number)

In accordance with 28 U.S.C. § 1746, I declare under penalty of perjury that the foregoing is true and correct.

Dated

Signature

(Please return this form to the Chapter 7 or Chapter 13 Trustee assigned in this case.)